



IAP6 Rec'd PCT/PTO 17 JUL 2007

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PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
YVES CLAUDE NICOLAU, ET AL.)
) Attorney Docket No. 54341-0403
Application No. 10/590,073) (13704.105012)
)
Filed: February 22, 2005) Examiner:
)
For: METHODS AND COMPOSITIONS COMPRISING) Art Unit:
SUPRAMOLECULAR CONSTRUCTS)
)

**RESPONSE TO NOTIFICATION OF MISSING REQUIREMENTS UNDER
35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE
(DO/EO/US)**

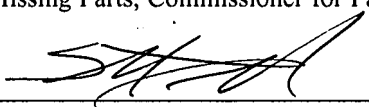
Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Notification of Missing Requirements Under 35 U.S.C. 371 in the United States Designated/Elected Office (DO/EO/US) (the "Notice") mailed from the United States Patent and Trademark Office April 18, 2007, for which a response is due July 18, 2007, with a one month extension of time, Applicants submit the following:

1. Notice to File Missing Requirements Under 35 U.S.C. 371 in the United States Designated/Elected Office (DO/EO/US) - Copy;
2. Executed Declaration and Power of Attorney in compliance with 37 C.F.R. 1.497(a) and (b);
3. Petition for 1 month Extension of Time;

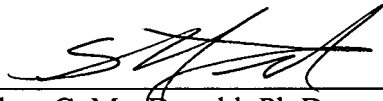
I hereby certify that this correspondence is being sent to the United States Patent and Trademark Office via first class mail, postage prepaid, to Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 13, 2007.


Stephen C. MacDonald, Ph.D., Reg. No. 60,401

4. Credit Card authorization in the amount of \$125 (\$60.00 for a one month extension of time fee and \$65 missing requirements fee);
5. Fee Transmittal; and
6. Postcard.

It is believed that the submission of these documents and fees constitutes a complete response to the Notice. The Commissioner is hereby authorized to charge any underpayment of fees or to credit any overpayment to Deposit Account No. 11-0980.

Respectfully submitted,

By: 
Stephen C. MacDonald, Ph.D.
Reg. No. 60,401

Date: July 13, 2007

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07/20/2007 GFREY1 00000045 10590073

01 FC:2617	65.00 OP
02 FC:2251	60.00 OP

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2007

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 125

Complete if Known

Application Number	10/590,073
Filing Date	February 22, 2005
First Named Inventor	Yves Claude Nicolau, et al.
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	54341-0403 (13704.105012)

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____

☐ Deposit Account Deposit Account Number: 11-0980 Deposit Account Name: King & Spalding, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments

Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
_____ -20 or HP= _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims	Extra Claims	Fee (\$)
_____ - 3 or HP= _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		
	Fee Paid (\$)	Multiple Dependent Claims
	Fee (\$)	Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

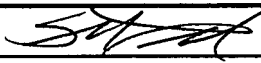
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Missing Requirements and One Month Extension of Time 125.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	60,401	Telephone	404-572-2715
Name (Print/Type)	Stephen C. MacDonald, Ph.D.	Date	July 13, 2007		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.